221 S. Mooney Blvd. Room 101-E Visalia, CA 93291

> Telephone: (559) 636-5280 Fax: (559) 730-2532

## **CLAIM FOR PROPERTY TAX REFUND** PURSUANT TO REVENUE AND TAXATION CODE, SECTION 5097

- 1. I, THE UNDERSIGNED, AM THE PARTY WHO PAID THE TAX FOR WHICH CLAIM FOR REFUND IS HEREIN MADE.
- 2. THIS CLAIM IS FILED:

- WITHIN FOUR YEARS OF PAYMENT OF THE TAX, OR WITHIN ONE YEAR OF THE a. POSTING OF THIS NOTICE PER TAXATION CODE, SECTION 2635
- 3. THE TAX FOR WHICH CLAIM FOR REFUND IS HEREIN MADE WAS PAID ON: N/A
- THIS CLAIM FOR REFUND IS FILED, PURSUANT TO REVENUE AND TAXATION CODE SECTION 5096,

IN THAT THE TAX WAS REDUCED DUE TO AUDITOR OR ASSESSOR'S ROLL CORRECTION.	
ASSESSMENT NO	BOC NO:
5. THE AMOUNT CLAIMED IS: \$	
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY CORRECT.	THAT THE FOREGOING IS TRUE AND
EXECUTED ON THE DATE OF Month and Day	20
Month and Day <u>NOTE:</u> YOUR SIGNATURE(S) MUST BE NOTARIZED IF TI	
SIGNATURE:	A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.
PRINTED NAME:	State of California
MAILING ADDRESS:	County of) On
CITY, STATE, ZIP:	before me,,Notary Public,
PHONE NUMBER:	personally appeared,
COMPANY (if applicable):  If the mailing address for the refund and the tax roll address are not the same, you will be requested to provide proof of payment.	who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
RETURN CLAIM FORM TO:  COUNTY OF TULARE - AUDITOR DEPT PROPERTY TAX ACCOUNTING DIVISION 221 S. MOONEY BLVD RM 101E VISALIA CA 93291-4545	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.